APR 3 0 2002

Attorney's Docket No. 020600-283 TECH CENTER 1600/2900

## THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Pate	ent Application of )	BOX: AF				
Günther S	SCHMIDT et al.	Group Art Unit: 1655				
Application	on No.: 09/462,408	Examiner: Betty J. Forman				
Filed: A	pril 10, 2000					
For: C	CHARACTERISING NUCLEIC ACIDS )					
	AMENDMENT/REPLY TRA	NSMITTAL LETTER				
	Commissioner for Patents on, D.C. 20231					
Sir:						
Encl	osed is a reply for the above-identified paten	t application.				
[X]	[X] A Petition for Extension of Time is also enclosed.					
[]	A Terminal Disclaimer and a check for [ ] \$55.00 (248) [ ] \$110.00 (148) to cover the requisite Government fee are also enclosed.					
[X]	Also enclosed Attachment to Amendment and Reply under 37 C.F.R. § 1.116 dated April 26, 2002.					
[X]	Small entity status is hereby claimed.					
[]	[ ] Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [ ] \$370.00 (279) [ ] \$740.00 (179) fee due under 37 C.F.R. § 1.17(e).					
	[ ] Applicant(s) previously submitted, requested.	on, for which continued examination is				
[]	Applicant(s) request suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.					
[]	A Request for Entry and Consideration of S (146/246) is also enclosed.	Submission under 37 C.F.R. § 1.129(a)				
[X]	No additional claim fee is required.					
[]	An additional claim fee is required, and is	calculated as shown below:				

	No. Of CLAIMS	A MENDED  HIGHEST NO.  OF CLAIMS  PREVIOUSLY  PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE	
Total Claims		MINUS =		× \$18.00 (103) =		
Independent Claims		MINUS =		× \$84.00 (102) =		
If Amendment adds mu	ltiple depende	ent claims, add \$280	).00 (104)			
Total Amendment Fee	**************************************					
If small entity status is claimed, subtract 50% of Total Amendment Fee						
TOTAL ADDITIONA	D FIELD DUE	FOR THIS AMEN	DMENT			

[	]	A claim fee in the	amount of \$	is enclosed.
I	]	Charge \$	to Deposit Account N	o. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

By: Deborah H. Yellin

Registration No. 45,904

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: April 26, 2002